

Appendix A—Test Security Guidelines and Forms

Assessment materials are to be kept in a locked secure location until testing time. All test coordinators and teachers are required to sign a security agreement/affidavit prior to each test administration. Upon completion of testing, all test materials are to be collected and returned to Harcourt Assessment according to the dates specified for each administration.

Teachers/examiners administering assessments are not to provide answers to students, copy any portion of the test, or in any way contribute to test security practices which violate the Code of Professional Ethics set for South Dakota Educators. The South Dakota Professional Teachers Practices and Standards Commission Administrative Rule Codes 24:08:03:01 Obligations to Students, 24:08:03:02 Obligations to the Public, and 24:08:03:03 Obligations to the Profession provide direction for educators. The Code of Ethics for professional administrators is cited in Administrative Rule 24:11:03:01.

Unethical test practices include, but are not limited to:

1. Encouraging students to be absent the day of testing.
2. Encouraging students not to do their best because of the purpose of the test.
3. Not testing all students.
4. Reclassifying students solely for the purpose of avoiding state testing.
5. Failing to provide necessary accommodations during testing (if applicable).
6. Interpreting, explaining, or paraphrasing a test item.
7. Copying the test in any way.
8. Changing or altering student responses at any time.
9. Using secure test items for instruction.

Critical dates are clearly defined in the *Test Coordinator's Handbook* as to when scorable materials must be received by Harcourt Assessment. Failure to adhere to these dates may result in scoring delays, a school's having to pay for their own scoring, or in the case of NCLB accountability, an endangerment to the school's AYP calculation.

Test coordinators are to complete *Test Security Agreements* and obtain signed *Test Security Affidavits* from all teachers/examiners for EACH of the following assessments:

Stanford Writing

Dakota STEP Field Test(s)

Dakota ELP

Dakota STEP-A

Dakota STEP

Signed documents must be returned to the Department of Education as noted within the *Test Coordinator's Handbook*.

TEST SECURITY AGREEMENT

For State Agency and District Personnel, and Test Coordinators

I acknowledge that the _____ is a secure assessment and agree to the following conditions of use to ensure test security:

1. a) I will take all necessary precautions to safeguard all test materials by limiting access to persons within the school district or agency with a responsible, professional interest in the test's security.
b) The names of all persons having access to the materials will be kept on file.
c) All persons having access to the materials (other than students to whom the test is administered) will sign a security affidavit, which will be kept on file in the school district office.
2. a) I will keep the test materials under lock and key, except on actual testing dates, limiting access to those responsible for their security.
b) Secure test materials, including test booklets and directions, will be delivered to examiners no sooner than the date of testing, unless logistics dictate an earlier delivery date.
c) Test materials will be kept secure until they are actually distributed to students.
d) In no case will students be permitted to remove test materials from the room where testing takes place.
3. I will not disclose or allow to be disclosed the contents of, or the scoring keys to, the test instrument.
4. Upon completion of testing, I will return all test materials to the designated test coordinator of the school district, who will in turn return all test materials to Harcourt Assessment.
5. I will develop, distribute, and enforce disciplinary procedures for the violation of test security by district or agency staff.

By signing my name to this document, I am assuring Harcourt Assessment that I and anyone having access to the test materials will abide by the above conditions.

Signature: _____ District/Agency: _____

Printed Name: _____ Address: _____

Title: _____ Address: _____

Date: _____ City/State/ZIP: _____

TEST COORDINATORS—Send your original *Test Security Agreement* and all teacher/examiner *Test Security Affidavits* to Gay Pickner, c/o South Dakota Department of Education, 700 Governors Drive, Pierre, SD 57501.

Retain copies of the *Test Security Agreement* and the teacher/examiner *Test Security Affidavits* at the district office.

TEST SECURITY AFFIDAVIT

For Teachers/Examiners

I acknowledge that I will have access to the _____ test materials for the purpose of administering the assessment. I understand that these materials are highly secure, and it is my professional responsibility to protect their security as follows:

1. I will not divulge the contents of the test, generally or specifically, to anyone.
2. I will not copy any part of the test or directions.
3. I will limit access to the test materials by examinees only to actual testing periods.

Signature: _____ District/Agency: _____

Printed Name: _____ School: _____

Position: _____ Address: _____

Date: _____ City/State/ZIP: _____

	Number	Teacher's Initials	Test Coordinator's Initials
Test booklets issued	_____	_____	_____
Test booklets returned	_____	_____	_____

Return this signed *Test Security Affidavit* to your test coordinator after receiving test materials.

TEST COORDINATORS—Send all teacher/examiner *Test Security Affidavits* to Gay Pickner, c/o South Dakota Department of Education, 700 Governors Drive, Pierre, SD 57501.

Retain copies of the teacher/examiner *Test Security Affidavits* at the district office.

South Dakota Department of Education**REPORT OF TEST IRREGULARITY**

If it is determined that an irregularity in testing has occurred, the local district is to fax this form within 24 hours of the occurrence to Gay Pickner at the SD Department of Education at 605-773-3782. The form may also be e-mailed to gay.pickner@state.sd.us or mailed to Gay Pickner, c/o South Dakota Department of Education, 700 Governors Drive, Pierre, SD 57501.

District: _____

School: _____

Date: _____

Test Coordinator: _____ Phone: _____

E-Mail: _____

Description of Irregularity:

Action taken to correct:

What actions will be taken to avoid this type of incident again?